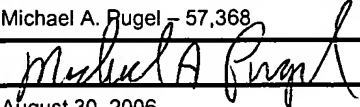


POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	
	Filing Date	
	First Named Inventor	STEVEN PORTER HOTELLING, ET AL.
	Title	DUAL AXIS VIBRATION RATE GYROSCOPE
	Art Unit	
	Examiner Name	
	Attorney Docket Number	PU040287

I hereby appoint:											
<input checked="" type="checkbox"/> Practitioners at Customer Number	Customer Number 24498										
OR											
<input type="checkbox"/> Practitioner(s) named below:											
<table border="1"><thead><tr><th>Name</th><th>Registration Number</th></tr></thead><tbody><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr></tbody></table>	Name	Registration Number									
Name	Registration Number										
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.											
Please recognize or change the correspondence address for the above-identified application to:											
<input type="checkbox"/> The above-mentioned Customer Number:											
OR											
<input type="checkbox"/> The address associated with Customer Number:											
OR											
<input checked="" type="checkbox"/> Firm or Individual Name	Joseph J. Laks, THOMSON LICENSING INC.										
Address	PATENT OPERATIONS										
Address	P. O. BOX 5312										
City	PRINCETON	State	NJ	ZIP	08543-5312						
Country	USA										
Telephone	609-734-6819	Fax	609-734-6888								
I am the:											
<input type="checkbox"/> Applicant/Inventor.											
<input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).											
SIGNATURE of Applicant or Assignee of Record											
Name	Michael A. Rugel - 57,368										
Signature											
Date	August 30, 2006		Telephone	317-587-4027							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.											
<input checked="" type="checkbox"/> *Total of 3 forms are submitted.											

POWER OF ATTORNEY
THOMSON LICENSING

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

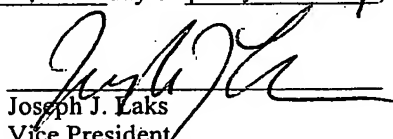
does hereby grant

Harvey D. Fried - Sr. Patent Counsel/Manager
Ronald H. Kurdyla - Sr. Patent Counsel/Manager
Robert D. Shedd - Sr. Patent Counsel/Manager
Robert B. Levy - Sr. Patent Counsel/Manager
Frank Y. Liao - Sr. Patent Counsel/Manager
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Brian J. Cromarty - Patent Agent
Ronald Kolczynski - Member Patent Staff
Michael A. Pugel - Patent Agent
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005.

DATED this 27th day of February, 2006.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS



**POWER OF ATTORNEY
THOMSON LICENSING**

We,

THOMSON LICENSING
46, Quai A. Le Gallo
F-92100 Boulogne-Billancourt
France

do hereby grant

Joseph J. Laks
Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

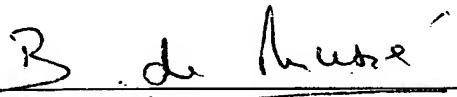
a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005

DATED this ____14th____ day of __February__, in the year 2006.

Signature:

Typed Name As Signed:

Title:


Béatrix de Russé
Authorized Representative,
Vice-President Intellectual Property & Licensing

THOMSON LICENSING



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PU040287
	First Named Inventor	Steven Porter Hotelling et al
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

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DUAL AXIS VIBRATORY RATE GYROSCOPE

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **March 11, 2005** as United States Application Number or PCT International

Application Number **PCT/US05/08081** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
US 60/552,652	March 12, 2004	

[Page 1 of 3]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> Customer Number or Bar Code Label	24498	OR	<input checked="" type="checkbox"/> Correspondence address below
Name	JOSEPH S. TRIPOLI				
Address	THOMSON LICENSING INC.				
Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	317-587-4019	Fax	(609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	STEVEN PORTER		Family Name or Surname HOTELLING		
Inventor's Signature					Date
Residence: City	San Jose	State	California	Country	US
Citizenship	US				
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City	San Jose	State	California	ZIP	95120
Country	US				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	LEX		Family Name or Surname BAYER		
Inventor's Signature					Date
Residence: City	Menlo Park	State	California	Country	US
Citizenship	ZA				
Mailing Address					
Mailing Address 691 Roble Avenue, #4					
City	Menlo Park	State	California	ZIP	94306
Country	US				
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BRIAN R.		LAND	
Inventor's Signature <i>Brian R. Land</i>		Date <i>4/19/2005</i>	
Residence: City Redwood City	State California	Country US	Citizenship US
Mailing Address			
Mailing Address 2726 Sussex Way			
City Redwood City	State California	ZIP 94061	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
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Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	PU040287	
	First Named Inventor	Steven Porter Hotelling et al	
	COMPLETE IF KNOWN		
	Application Number	/	
	Filing Date		
	Group Art Unit		
<input checked="" type="checkbox"/> Declaration Submitted With Initial Filing	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DUAL AXIS VIBRATORY RATE GYROSCOPE

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **March 11, 2005** as United States Application Number or PCT International

Application Number **PCT/US05/08081** and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
US 60/552,652	March 12, 2004	

[Page 1 of 3]

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Address	THOMSON LICENSING INC.				
Address	PO Box 5312				
City	PRINCETON	State	NJ	ZIP	08543-5312
Country	USA	Telephone	317-587-4019	Fax	(609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	STEVEN PORTER		Family Name or Surname HOTELLING		
Inventor's Signature					Date
Residence: City	San Jose	State	California	Country	US
Citizenship	US				
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City	San Jose	State	California	ZIP	95120
Country	US				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	LEX		Family Name or Surname BAYER		
Inventor's Signature	<i>Joe Bayer</i>		Date 04/21/05		
Residence: City	Palo Alto	State	California	Country	US
Citizenship	ZA				
Mailing Address					
Mailing Address 4030 Avenida Ave 691 Robie Avenue, #4					
City	Palo Alto	State	California	ZIP	94306
Country	US				
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BRIAN R.		LAND	
Inventor's Signature		Date	
Residence: City	Redwood City	State	California
		Country	US
Citizenship			
US			
Mailing Address			
Mailing Address 2726 Sussex Way			
City	Redwood City	State	California
		ZIP	94061
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Residence: City		State	
		Country	
Citizenship			
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted With Initial
Filing
OR
☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	PU040287
First Named Inventor	Steven Porter Hotelling et al
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

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					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
US 60/552,652	March 12, 2004	

[Page 1 of 3]

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City		State		ZIP	
PRINCETON		NJ		08543-5312	
Country		Telephone		Fax	
USA		317-587-4019		(609) 734 - 6888	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Family Name or Surname			
STEVEN PORTER		HOTELLING			
Inventor's Signature		<i>Steven Porter Hotelling</i>		Date	
				4/13/05	
Residence: City		State		Country	
San Jose		California		US	
Mailing Address					
Mailing Address 1351 Hidden Mine Road					
City		State		Country	
San Jose		California		US	
ZIP					
95120					
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Family Name or Surname			
LEX		BAYER			
Inventor's Signature		Date			
Residence: City		State		Country	
Menlo Park		California		US	
Citizenship					
ZA					
Mailing Address					
Mailing Address 691 Roble Avenue, #4					
City		State		Country	
Menlo Park		California		US	
ZIP					
94306					
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Please type a plus sign (+) inside this box → +

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BRIAN R.		LAND	
Inventor's Signature		Date	
Residence: City	Redwood City	State	California
		Country	US
Citizenship			
US			
Mailing Address			
Mailing Address 2726 Sussex Way			
City	Redwood	State	California
City		ZIP	94061
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.